

FEB 8 1924

203

CALIFORNIA STATE BOARD OF HEALTH

Weekly Bulletin



GEORGE E. EBRIGHT, M. D.
PRESIDENT

FRED F. GUNDRUM, M. D.
VICE PRESIDENT

A. J. SCOTT, JR., M. D.

EDWARD F. GLASER, M. D.

ADELAIDE BROWN, M. D.

ROBERT A. PEERS, M. D.

WALTER M. DICKIE, M. D.
SECRETARY AND EXECUTIVE OFFICER

Entered as second-class matter February 21, 1922, at the post office at Sacramento, California, under the Act of August 24, 1912.

Acceptance for mailing at special rate of postage provided for in Section 1103, Act of October 3, 1917.

Vol. II, No. 51

FEBRUARY 2, 1924

GUY P. JONES
EDITOR

Diphtheria, Measles and Scarlet Fever Show Increases.

One of the most outstanding features of the California morbidity summary for 1923 lies in the tremendous drop in the number of cases of influenza reported. Other diseases showing decreased prevalence in 1923 are malaria, mumps, pellagra, lobar pneumonia and typhoid fever. Most conspicuous among diseases showing increased prevalence in 1923 are measles, diphtheria, chickenpox, poliomyelitis, rabies in man and in animals, scarlet fever and whooping cough. Smallpox, tuberculosis and epidemic cerebrospinal meningitis remained about equal in prevalence during both years. The complete total follows:

California Annual Morbidity Summaries,
1922 and 1923.

Diseases	1922 Number Cases	1923 Number Cases
Anthrax in man	5	14
Chickenpox	5,390	7,928
Dengue	3	—
Diphtheria	8,711	9,519
Influenza	45,433	8,081
Malaria	215	196
Measles	1,048	26,881
Meningitis (epidemic cerebrospinal)	117	118
Mumps	2,506	1,014
Pellagra	32	42
Pneumonia (lobar)	5,514	4,223
Poliomyelitis (acute)	61	250
Rabies (in man)	4	11
Rabies (in animals)	517	1,015
Rocky Mountain Spotted Fever	4	3
Scarlet Fever	5,601	7,834
Smallpox	2,129	2,025
Tuberculosis (all forms)	8,208	8,485
Typhoid Fever	970	888
Typhus Fever	9	16
Whooping Cough	3,298	5,387

Immunity Against Measles is Established.

During the past year the New York State Department of Health has adopted the procedure of immunizing children, in institutions, against measles through the injection of blood serum from persons who are convalescent from the disease. New York City Department of Health has been following the same procedure, with favorable results, in the city's contagious disease hospitals. Immunization against measles by this method has been tried successfully in European countries and M. Roux, director of the Pasteur Institute in Paris is said to be enthusiastic over this method of preventing the disease. Several thousand children in Paris have been successfully immunized by means of blood serum from measles convalescents. The immunization is temporary, lasting, probably not more than three months.

New York City Health Department following the favorable results in contagious disease hospitals, has made the serum available for general use in young children who have been exposed to the disease. It has been proven that the serum is nearly always effective as a preventive if administered within four days of exposure to the disease. If the product is administered five or six days after exposure the development of the infection may be checked or at least the severity may be moderated. Since the supply of serum is necessarily limited, its distribution is restricted in New York City to children under three years of age, if less than seven days have

elapsed since they were exposed to a case of measles.

The blood used in the production of the serum is taken from healthy measles convalescents eight or more days after they develop a measles rash. The product is tested for purity and freedom from infection before it is made available for distribution. The importance of this new procedure can not be overlooked. Because of the fact that the source of the immunizing product is in healthy convalescents, it would seem that it may not be available at all times. The fact that the immunization is temporary is not wholly in its favor, but, if it can be used satisfactorily in very young children, among whom mortality from the disease and its complications is always high, it will become a definitely and permanently established procedure in all health departments. The additional fact that its use has been sanctioned and adopted by the health departments of both New York State and New York City proves that it is worthy of careful consideration by all health officers.



Films on Child Hygiene Available.

The Bureau of Child Hygiene of the California State Board of Health has the following one-reel motion picture films for distribution:

The Error of Omission, which deals with the subject of birth registration; The Baby's Bath and Toilet, which shows standard methods of caring for infants; Bringing It Home, which portrays the operation of an infant welfare station.

All of these films are suitable for showing before general and mixed audiences. Application for the use of any of these reels should be addressed to the Bureau of Child Hygiene, State Board of Health, 335 State Building, San Francisco.



The disease not seldom attacks the rich though it thrives most among the poor. But by reason of our common humanity we are all, whether rich or poor, more nearly related here than we are apt to think. The members of the great human family are bound together by a thousand ties of whose existence the world in general little dreams. And he that was never yet connected with his poorer neighbor by deeds of charity or love, may one day find, when it is too late, that he is connected with him by a bond which may bring them both to a common grave.

William Budd in "Typhoid Fever," London, 1873.

Death of Dr. Holt is Loss to World's Children.

Dr. L. Emmett Holt, who died in Pekin, China, January 14, 1924, will perhaps be longest remembered as the author of a book, "The Care and Feeding of Children," which, through twelve editions, has been for twenty-five years an authority in the homes, not only of the United States, but of South America and Europe, and in China and Japan, where it has been invaluable in medical missionary work.

Recognized as a physician of the highest rank and standards, his influence with his profession was invaluable in removing doubts concerning the value of popularizing health education. After the Child Health Organization program had grown up under his stimulating leadership, he enthusiastically joined with several directors of the American Child Hygiene Association, of which he had formerly been president, in bringing about an actual consolidation of these two great organizations in the American Child Health Association, and of which Dr. Holt served as First Vice-President from its beginning.

Dr. Holt was born March 4, 1855, at Webster, N. Y., was graduated from the University of Rochester in 1875, took his master's degree three years later, and, in 1880, was graduated from the College of Physicians and Surgeons of Columbia University. Later, when his work had brought him fame, he received the honorary degree of LL.D. from Rochester, and Sc.D. from Columbia and Brown Universities.

Dr. Holt's activities covered a wide field, but were devoted to a single interest. From 1890 to 1901, he was Professor of the Diseases of Children at New York Polyclinic, and from 1901, Clinical Professor in the Diseases of Children at the College of Physicians and Surgeons. At the time of his death, he was physician-in-chief at the Babies' Hospital, member of the Board of Directors and Secretary for the Rockefeller Institute for Medical Research, and Trustee, of the University of Rochester. He was a member of the Association of American Physicians, retiring president of the American Pediatric Society, and a trustee of the New York Academy of Medicine.

He conducted important research on infant metabolism and was the author of a number of pediatric papers. His book on "The Diseases of Infancy and Childhood" has been the standard text book in pediatrics in the medical schools of the country.

Though nearly seventy years old, he went to China in August, 1923, as special

lecturer at the Union Medical College in Pekin, an institution maintained by the Rockefeller Foundation. His death is a loss, not only to the nation, but to the world, whose children he made it his mission to save and serve.

❀ ❀

Streptococcus Assumes a New Importance.

The Streptococcus, first described by Pasteur, and among the most commonly encountered of all organisms, is assuming a new importance in recent investigations into the causes of various communicable diseases, notably scarlet fever. This organism has always been recognized as a factor in secondary infections associated with scarlet fever, but until recently, although long under suspicion, it has not been regarded as a primary causative factor in the production of the disease. It would appear, however, that Chicago physicians, according to the Journal of the American Medical Association, have succeeded in producing experimental scarlet fever by injecting cultures of hemolytic streptococci in healthy human beings. These same physicians, according to the Journal have succeeded in developing a successful immunity reaction to scarlet fever. This reaction, together with the successful production of scarlet fever in human beings leads the Journal to express a justification of the hope that "the problem of the cause and nature of scarlet fever is about to be solved, and that a sound experimental basis is being laid for the production of a specific curative serum for scarlet fever as well as for protective inoculation."

Furthermore, it has been announced recently that the mortality from amoebic dysentery is not often caused by the primary infection, but by a septicaemia produced by a secondary streptococcus infection. The presence of this organism in various respiratory infections and the severe illness that always prevails wherever it is found leads to the inevitable conclusion that it is one of the most disastrous organisms with which we have to deal. It is believed that further research into the part that the streptococcus, in its many forms, plays in the various communicable diseases, will lead to discoveries that will mark great advances in the control of many diseases.

❀ ❀

Ignorance which results in misery to one's fellows is not only a vice but a crime.

Victor C. Vaughn, M.D.

❀ ❀

Only catastrophe can convince the mass of the people of the possibility of catastrophe.

H. G. Wells.

Public Lectures Given at U. C. Medical School.

The University of California Medical School is sponsoring a series of lectures upon health subjects. These lectures are given on Sunday afternoons at 2:15 in Toland Hall, University of California Hospital, Third and Parnassus Avenues, San Francisco. The general public is invited to attend. Dr. E. C. Fleischner and Dr. V. H. Podstata have already given the first two lectures of the series. Those remaining on the schedule are as follows:

Date, lecturer, and title of lecture:

- February 3—Dr. Guy S. Millberry.
What Should the Public Expect in Modern Dentistry?
- February 10—Dr. W. I. Terry.
What the Public Should Know About the Goiter.
- February 17—Dr. S. H. Hurwitz.
What the Public Should Know About Asthma.
- February 24—Dr. Howard H. Markel.
Modern Treatment of Diseases and Deformities of Bone and Joints. (Illustrated with lantern slides.)
- March 2—Dr. Karl F. Meyer.
What Should the Layman Know About the Prevention or Treatment of Diseases by Vaccines, Serums, Antitoxins, etc?
- March 9—Dr. Wm. J. Kerr.
Life Expectancy—What is Being Done to Prolong Human Life?
- March 16—Dr. Mary E. Botsford.
The Development of Modern Anaesthesia.
- March 23—Dr. Frank W. Lynch.
Prenatal Care (for women only).
- March 30—Dr. Walter C. Alvarez.
Different Types of Indigestion and How They are Diagnosed. (Illustrated with lantern slides.)
- April 6—Dr. E. W. Cleary.
The Care of Bone and Joint Injuries Under the California Workmen's Compensation Law.
- April 13—Dr. A. R. Kilgore.
What is Being Done About Cancer? (Illustrated with moving pictures.)
- April 20—Dr. Wm. P. Lucas.
Mind and Body Problems of the Growing School Child.
- April 27—Dr. Geo. E. Ebright, President State Board of Health.
Contagious Diseases in California and the Problem of Their Prevention and Control.

❀ ❀

MORBIDITY.*

Diphtheria.

311 cases of diphtheria have been reported, as follows: San Francisco 77, Los Angeles 96, Los Angeles County 17, Sacramento 6, Berkeley 7, Oakland 30, Fullerton 1, Pittsburg 3, Mendocino County 1, Kennett 2, Fillmore 3, San Bernardino County 2, Colton 1, Sutter Creek 1, Long Beach 4, Stanislaus County 1, Kern County 2, Santa Clara County 5, Pasadena 2, Fresno County 4, San Leandro 1, Whittier 4, Hermosa Beach 2, Hawthorne 1, El Monte 2, Alhambra 1, Santa Paula 2, Sonoma County 1, San Fernando 1, Richmond 2, Alameda 3, Petaluma 1, Livermore 1, Santa Barbara County 1, Tulare County 1, Burlingame 1, Bakersfield 2, Calexico 1, Salinas 1, San Jose 1, Turlock 1,

*From reports received on January 28 and 29 for week ending January 26.

Stockton 2, Redlands 3, San Gabriel 1, Pacific Grove 1, Ukiah 3, Oxnard 1, National City 1, Corona 1, San Bernardino 2.

Measles.

574 cases of measles have been reported, as follows: San Francisco 112, Los Angeles 67, Berkeley 43, Pasadena 15, San Mateo 22, Pittsburg 21, San Jose 8, Riverside 14, Eureka 6, Hanford 9, Merced 7, Merced County 20, Paso Robles 24, San Luis Obispo County 18, Alameda 14, Visalia 8, Napa County 5, Modesto 8, Marin County 4, Napa 6, Humboldt County 9, Fresno County 16, Bakersfield 5, Tulare County 8, Oakland 8, Santa Rosa 2, Lindsay 2, Kern County 2, Colusa County 3, Pomona 1, Sisson 3, Sonoma County 3, San Bernardino County 1, South Pasadena 2, Willows 3, Montebello 1, Santa Clara 1, Santa Clara County 2, Sausalito 1, Del Norte County 2, Redwood City 2, Calaveras County 4, San Luis Obispo 3, Morgan Hill 1, Oakdale 2, Sacramento 3, Petaluma 4, Mariposa County 1, Angels Camp 1, Taft 3, Monterey County 1, Stanislaus County 3, Santa Ana 1, Ukiah 1, Richmond 1, Hanford 12, Elsinore 3, Callexico 2, Palo Alto 1, Long Beach 3, Kennett 1, Ontario 5, Los Angeles County 4, Oxnard 1, Oceanside 3, San Bernardino 2.

Scarlet Fever.

315 cases of scarlet fever have been reported, as follows: Oakland 13, Los Angeles County 28, Los Angeles 88, San Francisco 58, Taft 14, Long Beach 5, Stanislaus County 5, Vallejo 10, Fresno County 5, Whittier 7, Santa Cruz County 3, Livermore 1, Visalia 2, Alameda 3, Sacramento 2, Santa Cruz 1, Eureka 1, Berkeley 2, Benicia 1, Pasadena 4, Fullerton 1, Alameda County 1, Orange County 2, Santa Ana 1, Ventura County 4, Riverside 2, Santa Barbara County 1, Colusa County 1, Elsinore 1, San Mateo 3, Napa 3, San Jose 1, Stockton 4, San Fernando 2, Torrance 1, San Joaquin County 1, Hermosa Beach 1, Vacaville 1, Modesto 1, Newman 1, Glendora 1, Hawthorne 1, Alhambra 1, Huntington Park 1, Pomona 1, Santa Paula 1, Merced County 1,

Merced 1, Chico 1, Nevada County 1, San Bernardino County 1, San Luis Obispo County 1, South Pasadena 4, Parlier 1, Red Bluff 2, Yuba County 1, Escondido 2, Yolo County 1, Gridley 3, Ukiah 1, Corona 1, San Bernardino 1.

Whooping Cough.

22 cases of whooping cough have been reported, as follows: Stockton 5, Oakland 2, San Francisco 2, Los Angeles 4, Santa Ana 1, Pasadena 3, Eureka 1, Colusa County 1, Riverside 1, Long Beach 1, Sonoma County 1.

Typhoid Fever.

5 cases of typhoid fever have been reported, as follows: Whittier 1, Los Angeles 1, Sacramento 1, Long Beach 1, San Bernardino 1.

Smallpox.

314 cases of smallpox have been reported, as follows: Los Angeles 139, Los Angeles County 61, Long Beach 30, Compton 20, South Gate 5, El Segundo 5, Pomona 12, Chino 5, La Verne 4, Huntington Park 3, South Pasadena 1, Manhattan Beach 2, Alhambra 2, Covina 3, Hermosa Beach 1, Torrance 1, Redondo Beach 4, Santa Monica 3, Pasadena 3, Sacramento 1, Fullerton 1, Orange County 1, Riverside 4, San Francisco 1, Santa Paula 1, San Bernardino 1.

Cerebrospinal Meningitis.

3 cases of cerebrospinal meningitis have been reported, as follows: Alameda County 1, Stockton 1, Butte County 1.

Poliomyelitis.

2 cases of poliomyelitis have been reported as follows: Los Angeles 1, Glenn County 1.

Epidemic Encephalitis.

5 cases of epidemic encephalitis have been reported, as follows: San Francisco 3, Los Angeles 1, Fort Bragg 1.

Epidemic Jaundice.

Los Angeles County reported one case of epidemic jaundice.

COMMUNICABLE DISEASE REPORTS.

DISEASE	1924				1923			
	Week ending			Reports for week ending Jan. 26 received by Jan. 29	Week ending			Reports for week ending Jan. 27 received by Jan. 30
	Jan. 5	Jan. 12	Jan. 19		Jan. 6	Jan. 13	Jan. 20	
Anthrax.....	0	0	0	0	0	0	1	0
Cerebrospinal Meningitis.....	0	3	4	3	3	1	1	1
Chickenpox.....	223	463	342	309	167	151	172	122
Diphtheria.....	285	310	345	311	157	209	166	166
Dysentery (Bacillary).....	0	0	0	1	0	0	0	2
Epidemic Encephalitis.....	5	2	5	5	0	4	4	9
Epidemic Jaundice.....	0	0	0	1	0	0	0	0
Gonorrhoea.....	108	78	140	71	127	165	57	99
Influenza.....	31	52	43	44	33	45	156	185
Leprosy.....	0	0	0	0	0	0	0	1
Malaria.....	0	1	2	0	1	3	0	1
Measles.....	432	618	564	574	63	62	110	110
Mumps.....	20	23	33	24	11	16	20	15
Pneumonia.....	94	139	120	93	75	90	83	92
Poliomyelitis.....	2	0	3	2	0	0	0	2
Rabies (Human).....	0	0	0	0	0	0	0	0
Scarlet Fever.....	251	277	378	315	142	169	141	121
Smallpox.....	152	233	362	314	25	28	19	10
Syphilis.....	133	181	164	67	100	124	61	128
Tuberculosis.....	127	231	164	141	162	154	161	126
Typhoid Fever.....	5	13	11	5	9	13	15	10
Typhus Fever.....	0	0	0	0	0	0	0	0
Whooping Cough.....	28	51	44	22	85	123	118	59
Totals.....	1896	2675	2724	2302	1089	1160	1285	1259